



NOTICE OF INTENT (NOI)

For Authorization to Discharge Stormwater Runoff from Construction Activities  
 In accordance with the Kansas Water Pollution Control General Permit  
 Under the National Pollutant Discharge Elimination System (NPDES)

Submission of this Notice of Intent constitutes notice that the party identified in Section I of this form requests authorization for coverage under the Kansas Water Pollution Control general permit, or KDHE issued successor permits, issued for stormwater runoff from construction activities in the State of Kansas. Becoming a permittee obligates the discharger to comply with the terms and conditions of the general permit. **Completion of this NOI does not provide automatic coverage under the general permit. Coverage is provided and discharge permitted when the Kansas Department of Health and Environment (KDHE) authorizes the discharge of stormwater runoff from the construction activities identified on the NOI and supporting documentation. A signed and dated copy of the first page of the NOI indicating the Authorization will be provided to the owner or operator, or all three pages for Conditional Authorizations.** Upon authorization of the construction activity discharge, a Kansas permit number and a Federal permit number will be assigned to the construction project. **A complete request for Authorization for coverage under the general permit must be submitted or the request will not be processed (see listing on Page 3 of this NOI).** KDHE will notify owners or operators whose Notice of Intent (NOI) and supporting documentation for Authorization of stormwater runoff associated with construction activities are incomplete, deficient, or denied.

Please Print or Type.

**I. OWNER OR OPERATOR ADDRESS, BILLING, CONTACT & RECORDS LOCATION INFORMATION**

<p><b>A.</b> Owner or Operator's Name: _____          Company Name: _____          Owner or Operator's Phone: _____          Mailing Address: _____          City: _____ State: ____ Zip: _____</p>	<p><b>C.</b> Contact Name: _____          Company Name: _____          Contact Phone: _____          Mailing Address: _____          City: _____ State: ____ Zip: _____          E-mail Address (optional): _____</p>
<p><b>B.</b> Billing Contact Name: _____          Billing Contact Address (if different): _____          City: _____ State: ____ Zip: _____</p>	<p><b>D.</b> Address where records will be kept (if not on-site):          Records Address: _____          City: _____ State: ____ Zip: _____</p>

**II. SITE INFORMATION**

<p><b>A.</b> Project Name: _____          Site Address: _____          City: _____ State: ____ Zip: _____          (Nearest City to Project) County: _____</p>	<p><b>B. LEGAL SITE DESCRIPTION:</b>          _____ QTR of _____ QTR of _____ QTR Section: _____          Township: _____ South; Range: _____ <input type="checkbox"/> E <input type="checkbox"/> W          Latitude: _____, Longitude: - _____          Deg. Min. Sec. Deg. Min. Sec.</p>
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For Official Use Only:

Received	Amount Paid:	Authorized: <input type="checkbox"/> Y; <input type="checkbox"/> N
	Date:	Is Authorization Conditional? <input type="checkbox"/> Y; <input type="checkbox"/> N (if yes, see page 3 of NOI for conditions)
	Initials:	
	Check No.:	
		Reviewer _____
Secretary, Kansas Department of Health and Environment		Date _____
KS Permit No.: _____ Federal Permit No.: _____		

Send completed 3 page NOI form with original signature and all appropriate submittals (see page 3 of NOI) to:

Note: A copy of the permit can be obtained at: [www.kdheks.gov/stormwater](http://www.kdheks.gov/stormwater) or by submitting a written request to KDHE.

Kansas Department of Health and Environment  
 Bureau of Water, Industrial Programs Section  
 1000 SW Jackson, Suite 420  
 Topeka, KS 66612-1367

**KDHE Contact Information:**  
 Phone: (785) 296-5545  
 E-mail: [stormwater@kdheks.gov](mailto:stormwater@kdheks.gov)

**C. EXISTING CONDITIONS/USES**

- 1) Is any part of the project located on Indian Country land?  Y;  N  
**If yes:** Contact EPA regarding discharging stormwater runoff from industrial activities on Indian Country land.
- 2) If stormwater runoff drains to or through a Municipal Separate Storm Sewer System (MS4): MS4 Name: \_\_\_\_\_
- 3) Name of the first receiving water, stream, or lake: \_\_\_\_\_, River Basin: \_\_\_\_\_
- 4) Are contaminated soils present on the site or is there groundwater contamination located within the site boundary?  Y;  N  
**If yes:** On separate paper please explain in detail the locations, contaminants and concentrations.
- 5) Are there any contaminated soils that will be disturbed or any contaminated groundwater that will be pumped by the proposed construction activity?  Y;  N  
**If yes:** On separate paper provide a description of the special erosion and sediment control measures to be utilized.
- 6) Are there any surface water intakes for public drinking water supplies located within 1/2 mile of the site discharge points?  Y;  N
- 7) Are there any known historical or archeological sites present within the site boundary or any historic structures located within 1000 feet of the project site?  Y;  N  
**Note:** Include documentation of project-specific coordination with the Kansas Historical Society in making this determination.
- 8) Is any threatened or endangered species habitat located within the site boundary or in the receiving water body?  Y;  N  
**Note:** Include documentation of project-specific coordination with the Kansas Department of Wildlife, Parks & Tourism in making this determination.
- 9) Will the project impact the line or grade of a stream or does it include dredge or fill of a potential jurisdictional water body or wetlands?  Y;  N  
**If yes:** Include documentation of project-specific coordination with the US Army Corps of Engineers and/or the Kansas Department of Agriculture, Division of Water Resources in making this determination.
- 10) Are any Critical Water Quality Management Areas, Special Aquatic Life Use Waters, or Outstanding National Resource Waters located within 1/2 mile of the facility boundary?  Y;  N  
**If yes,** list the names of all such areas and waters: \_\_\_\_\_

**D. PROJECT DESCRIPTION**

- 1) Project Description: \_\_\_\_\_  
 \_\_\_\_\_
- 2) Does this NOI include all proposed soil disturbing activities associated with the entire common plan of development?  Y;  N  
**If no,** explain what development areas of the site are not included in this NOI and provide contact information, if available, for the party or parties that own or have operational control of these areas:  
 \_\_\_\_\_  
 \_\_\_\_\_
- 3) Anticipated project Start Date: \_\_\_\_\_, and Completion Date: \_\_\_\_\_
- 4) Estimated total area to be disturbed: \_\_\_\_\_ Acres      Total area of the site: \_\_\_\_\_ Acres
- 5) Do you plan to disturb ten or more acres that are within a common drainage area?  Y;  N  
**If yes,** will a sedimentation basin be installed in that drainage area? (Attach design calculations for each sedimentation basin.)  Y;  N  
 If a sediment basin is not feasible, on a separate sheet explain what similarly effective erosion and sediment control measures will be implemented in lieu of a sedimentation basin.

**E. Maps**

Include an area map showing the outline of the construction site and the general topographic features of the area at least one mile beyond the project site boundary.

**F. EROSION CONTROL PLAN AND BEST MANAGEMENT PRACTICES**

- 1) Provide a site plan showing the existing contour, proposed contour, the erosion control measures and the locations of stormwater management or pollution control features including BMPs. Incorporate details and notes as necessary to describe the erosion control plans and BMPs.
- 2) Provide a description of the best management practices which will be utilized to control erosion, sedimentation and other pollutants in stormwater runoff during construction.

- 3) Provide a summary of the sequence of major soil disturbing activities and the corresponding erosion control measures or BMPs.
- 4) Provide the name and License or Certification Number of the engineer, geologist, architect, landscape architect, or Certified Professional in Erosion and Sediment Control (CPESC) under which the construction stormwater pollution prevention plan has been developed.

Name	License or Certification Number	Profession or Field (Engineer, Architect, etc.)
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**III. ANNUAL FEE**

Enclose a check for the first year of the annual permit fee specified in K.A.R. 28-16-56 et seq. as amended. Make the check payable to "KDHE". Per K.A.R. 28-16-56, as amended, the current annual permit fee for this general permit is \$60. An invoice for the annual permit fee will be sent to the contact person requesting a permit until such time as the permittee submits a Notice of Termination (NOT).

Failure to pay the annual fee will result in termination of the construction stormwater discharge Authorization.

**IV. OWNER OR OPERATOR CERTIFICATIONS**

I, the undersigned, certify that a Stormwater Pollution Prevention Plan (SWP2 Plan) will be or has been developed for the construction site described in this NOI and supporting documentation. I further certify that the plan will be implemented at the time construction begins, and, as required by the NPDES general permit for Stormwater Runoff from Construction Activity, will revise the SWP2 plan if necessary.

I understand that continued coverage under the NPDES general permit for Stormwater Runoff from Construction Activities is contingent upon maintaining eligibility as provided for in the requirements and conditions of the general permit, and paying the annual fee.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature (owner or operator)	Date
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\_\_\_\_\_  
Name and Official Title (Please print or type. **Form with original signature must be sent to KDHE.**)

**Conditions of Authorization - For Official Use Only:**

When indicated, Conditions of Authorization are as follows:

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\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**A complete request for Authorization for coverage under the general permit must be submitted or the request will not be processed. A complete request for Authorization includes:**

- An NOI form (construction stormwater) with an original authorized signature;
- The annual permit fee for the first year; (\$60.)
- An area map showing the outline of the construction site and the general topographic features of the area at least one mile beyond the project site boundary;
- A detailed site plan showing the existing contours, proposed contours, erosion and sediment control features, locations where stormwater runoff leaves the construction site;
- A narrative summary of the additional erosion and sediment control and other best management practices that will be utilized to prevent or reduce contamination of stormwater runoff from the construction activities;
- Total drainage area, storage capacity and design calculations for each sedimentation basin; and
- Copies of letters or e-mails documenting coordination with appropriate local, state or federal agencies.